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| <b>Effective on 12/08/2004.</b><br><b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b><br><h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">For FY 2007</h2> |  | <b>Complete if Known</b><br>Application Number: 10/603,478-Conf. #3518<br>Filing Date: June 24, 2003<br>First Named Inventor: Adele L. Boskey<br>Examiner Name: B. Y. S. Kwon<br>Art Unit: 1614<br>Attorney Docket No.: 05983/100J990-US1 |  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27   |  |   |  |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 790.00   |  |   |  |

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|---|--|
| <b>METHOD OF PAYMENT (check all that apply)</b><br><input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____<br><input type="checkbox"/> Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.<br>For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee<br><input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments |  |
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| FEE CALCULATION                               |             |                       |             |                       |                  |                       |                |
|---|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES |             |                       |             |                       |                  |                       |                |
| Application Type                              | FILING FEES |                       | SEARCH FEES |                       | EXAMINATION FEES |                       | Fees Paid (\$) |
|   | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)    | Small Entity Fee (\$) | Fee (\$)         | Small Entity Fee (\$) |                |
| Utility                                       | 300         | 150                   | 500         | 250                   | 200              | 100                   |                |
| Design  | 200         | 100                   | 100         | 50                    | 130              | 65                    |                |
| Plant   | 200         | 100                   | 300         | 150                   | 160              | 80                    |                |
| Reissue                                       | 300         | 150                   | 500         | 250                   | 600              | 300                   |                |
| Provisional                                   | 200         | 100                   | 0           | 0                     | 0                | 0                     |                |

| 2. EXCESS CLAIM FEES   |                     |                       |                      |
|--|---------------------|-----------------------|----------------------|
| Fee Description  | Fee (\$)            | Small Entity Fee (\$) |                      |
| Each claim over 20 (including Reissues)                                | 50                  | 25                    |                      |
| Each independent claim over 3 (including Reissues)                     | 200                 | 100                   |                      |
| Multiple dependent claims  | 360                 | 180                   |                      |
| <b>Total Claims</b>  | <b>Extra Claims</b> | <b>Fee (\$)</b>       | <b>Fee Paid (\$)</b> |
| 30   | 0                   | 50.00                 | 0.00                 |
| HP = highest number of total claims paid for, if greater than 20.      |                     |                       |                      |
| <b>Indep. Claims</b>   | <b>Extra Claims</b> | <b>Fee (\$)</b>       | <b>Fee Paid (\$)</b> |
| 5  | 0                   | 200.00                | 0.00                 |
| HP = highest number of independent claims paid for, if greater than 3. |                     |                       |                      |

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| <b>3. APPLICATION SIZE FEE</b><br>If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |                     |   |                 |
| <b>Total Sheets</b>   | <b>Extra Sheets</b> | <b>Number of each additional 50 or fraction thereof</b> | <b>Fee (\$)</b> |
| _____   | _____               | _____   | _____           |
| - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____   |                     |   |                 |
| <b>4. OTHER FEE(S)</b><br>Non-English Specification, \$130 fee (no small entity discount)<br>Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) 790.00   |                     |   |                 |
| <b>Fees Paid (\$)</b>   |                     |   |                 |

|                     |   |                                   |                |
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| <b>SUBMITTED BY</b> |   |                                   |                |
| Signature           |  | Registration No. (Attorney/Agent) | 36,073         |
| Name (Print/Type)   | Bonnie Kramer Carney  | Telephone                         | (212) 527-7700 |
|                     |   | Date                              | May 7, 2007    |